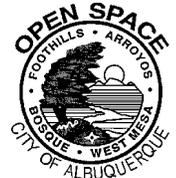




CITY OF ALBUQUERQUE

OPEN SPACE DIVISION

OPEN SPACE VOLUNTEER PROGRAM INFORMATION FORM



Badge No.: _____

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Telephone Number: _____ Work Telephone Number: _____ Cell: _____

Email Address/Web page address: _____

Emergency Contact: _____ Relationship: _____

Address: _____ Phone Number: _____

<p>Adopt-an-Open Space Volunteers:</p> <p>Group Name: _____</p> <p>Area Adopted: _____</p>

Circle area(s) in Open Space you frequent most often:

Elena Gallegos Sandia Foothills East Mountains (please specify which area):

Rio Grande State Park (Bosque) Petroglyph National Monument Other areas (please specify):

Do you visit these areas to:

Hike Bike Ride horseback Other:

Which volunteer activities are you most interested in?

- | | |
|--|---|
| <input type="checkbox"/> <i>Biological Monitoring</i> | <input type="checkbox"/> <i>Opening Parks</i> |
| <input type="checkbox"/> <i>Clerical/Office Assistance</i> | <input type="checkbox"/> <i>Patrolling Trails</i> |
| <input type="checkbox"/> <i>Crew Leader</i> | <input type="checkbox"/> <i>Resource Restoration</i> |
| <input type="checkbox"/> <i>Data Entry</i> | <input type="checkbox"/> <i>Trail Maintenance</i> |
| <input type="checkbox"/> <i>Graphic Design</i> | <input type="checkbox"/> <i>Visitor Information</i> |
| <input type="checkbox"/> <i>Interpretation/Education Tours</i> | <input type="checkbox"/> <i>Other (please specify):</i> |

Continues on reverse side

Please describe any specific qualifications, skills, experience, or education that apply to the volunteer activities that you would like to do.

Have you volunteered before? Yes _____ No _____

If Yes, please describe your volunteer experience.

Please specify any physical limitations that may influence your volunteer work activities:

(The City of Albuquerque encourages participation in all programs and activities and does not discriminate on the basis of race, color, national origin, ancestry, gender, religion, age, or ability in employment or the provision of services, programs, or activities)



Volunteer Signature

Date